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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. Michael E Doherty First Inventor Personalized Agent for... Express Mail Label No. ET830972514 US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS			DRESS TO: Box I	Patent Applica	
See MPEP chapter 600 conc	Was	hington, DC 2	0231		
1. X (Submit an original and a d		7. [CD-ROM or CD-R in Computer Program (Appendix)	
2. X Applicant claims sr See 37 CFR 1.27.			ucleotide and/or Amino Ad f applicable, all necessary		Submission
3. Specification (preferred arrangement	[Total Pages 26] set forth below)	a.	Computer Readabl	•	
Descriptive title of the invention Cross Reference to Related Applications		b.	b. Specification Sequence Listing on:		
- Statement Rega	rding Fed sponsored R & D quence listing, a table,			· CD-R (2 copi	es); or
or a computer p	rogram listing appendix	_	i i. paper c. Statements verifying identity of above copies		
- Background of t - Brief Summary	of the Invention	r r	ACCOMPANYING A		
- Brief Description - Detailed Descrip	n of the Drawings (<i>if filed</i>) otion	9.	Assignment Papers		
- Claim(s) - Abstract of the l	Disclosure	10	37 CFR 3.73(b) Sta	tement [Power of Attorney
], 11	(when there is an a	• ,	
4. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1 12	Information Disclosure Copies of IDS		
a. Newly executed (original or copy)			Statement (IDS)/PT		— Oldlivio
Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)			13. Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
i. DELETION OF INVENTOR(S)			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)		
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			Nonpublication Re	quest under 3	5 U.S.C. 122
1.63(d)(2) and 1.33(b). 16. (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.				n form PTO/SB/35	
6 Application Data					
18. If a CONTINUING APPLIC or in an Application Data She	CATION, check appropriate box, and	supply the re	quisite information below	and in a prelin	ninary amendment,
Continuation	Divisional Continuation-in-part ((CIP)	of prior application No.:		
Prior application information:	Examiner		Group Art Unit.		
	ONAL APPS only: The entire disclosure the disclosure of the accompanying or				
	relied upon when a portion has been in	advertently on	itted from the submitted ap		orated by reference.
19. CORRESPONDENCE ADDRESS					
Customer Number or Bar Code Label United Customer No. or Adaptives tode label or Adaptives tode label need to a constant need to a c					
Name	Michael Emmett	Dohert	У		
	5542 Squirrel F	Run Ln			
Address					
City	Cincinnati	State	ОН	Zip Code	45247
Country	U.S.A.	Telephone	513-385-554	Fax	
Name (Print/Type)	Michael E. Doher	tv R	egistration No. (Attorne	v/Agent)	
O'matura	7/10/19/01	<u> </u>	J		

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF PAYMEN	17

(\$) 355

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	MICHAEL	EMMETT DOHERTY		
Examiner Name		·		
Group Art Unit				
Attorney Docket No.				

METHOD OF PAYMENT	METHOD OF PAYMENT FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated foca and and it are appropriately formatted.	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to:	Large Small			
Account	Entity Entity			
Number Deposit	Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid		
Account Name	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status.	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed: Check Credit card Money Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after			
1. BASIC FILING FEE	445 440 245 ES Extension for rank within first month			
Large Entity Small Entity	116 390 216 195 Extension for reply within second month			
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month			
404 740 COM SEE HAIRA GRAD COD	118 1,390 218 695 Extension for reply within fourth month			
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month			
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal			
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
	138 1,510 138 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional			
Fee from Ext <u>ra Claims below</u> Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)			
Total Claims	143 440 243 220 Design issue fee			
Independent Claims X = X	144 600 244 300 Plant issue fee			
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner			
	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection			
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1.129(a))			
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) O	Other fee (specify)			
**or number previously paid, if greater: For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	0		

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	MICHAEL E. DOHERTY	Registration No. (Attorney/Agent)	Telephone 513-385-5541
Signature	Michael C. Dehast	(prose)	Date 8-24-61

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